

Redcom Switch Product User Interview Guide

I. Demographic Information

- Please provide the following personal information

| Name | Position/Division | Agency Name & Mailing Address |
|---------------------|----------------------|--|
| | | |
| Phone & Fax Numbers | E-mail & Web Address | May we contact you in the future? (If yes, indicate any restrictions) |
| (P) | | <input type="checkbox"/> Yes _____ _____ |
| (F) | | <input type="checkbox"/> No |

- What category best describes the agency that you represent, and the level of government your agency represents?

| Category | Local | State | Federal | Commercial | Non-Profit | N/A |
|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Armed Forces | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire Department | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emergency Medical Svc | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Law Enforcement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Search and Rescue | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hazardous Materials | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Transportation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Public Works | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Information Technology | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2. System Information

- Please provide the following information regarding your current Redcom Switch configuration.

Date Installed: _____

Model Number: _____

Number of MSU Card Cages: _____

| Board Type | Board Name | Installed | | Installed Quantity |
|------------|--|-----------|----|--------------------|
| | | Yes | No | |
| Line | Attendant Console | | | |
| | Basic Rate Interface | | | |
| | Personal Handy-phone System CS-BRI board | | | |
| | Dynamic Line Circuit | | | |
| | 1200 ohm Line Circuit | | | |
| | 1900 ohm Line Circuit | | | |
| | Radio Line Interface | | | |
| | Expanded Line Circuit | | | |
| Trunk | Two-Way Loop Trunk | | | |
| | Answering Service Interface | | | |
| | CATS Board | | | |
| | CEPT 1 Interface | | | |
| | Digital Announcer Type II | | | |
| | T1 Interface MA0292 | | | |
| | E&M trunk, Digital Announcer Type 1 | | | |
| | GSRD Trunk | | | |
| | LSRD Trunk | | | |
| | Generic Trunk Circuit Slot | | | |
| | T1 with SS5 Signaling | | | |
| | CEPT with SS5 Signaling | | | |
| | Analog SS5 | | | |
| | Analog SF | | | |
| Service | 16-Party Conference | | | |
| | 8-Party Conference | | | |
| | Digital Signal Processor | | | |
| | Digital Test Interface | | | |
| | DTMF Receiver | | | |
| | DTMF Receiver/Sender | | | |
| | MF Sender/Receiver | | | |
| | MF Sender | | | |
| | MTI Board | | | |
| | R1/R2 Receiver/Sender with 4 circuits | | | |
| | R2 Sender/Receiver | | | |
| | Generic Service Circuit Slot | | | |
| | Clock Synchronizer | | | |
| | ETSI Service Board | | | |
| | Clock Synchronizer | | | |
| | Universal Sensor/Driver | | | |

2. Please provide a general description of the circuits that are supported by the boards in your system as indicated in the table above.

3. Please provide a general description of the mission that the Redcom switch supports for your organization.

3. Operational Feedback

General Questions

1. Did your organization look at switching solutions other than Redcom during the procurement process?

Yes ☐ No ☐

If Yes:

- Please list the other switches considered.

- Please describe why Redcom was selected for your solution.

2. Overall how satisfied are you with the Redcom switch?

Very Satisfied ☐ Satisfied ☐ Unsatisfied ☐

Comments:

3. Overall how satisfied are you with Redcom's customer service and technical support?

Very Satisfied ☐ Satisfied ☐ Unsatisfied ☐

Comments:

4. Did the Redcom work as advertised when it was installed.

Yes ☐ No ☐

If No:

- Please describe the problems encountered and how they were resolved.

Switch Reliability and Maintainability

5. How would you rate the overall reliability of the switch?

| | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Excellent | Good | Fair | Poor |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

6. Have you used the automatic diagnostic features of the switch?

Yes ☐ No ☐

If Yes:

- Did you find the diagnostics to be helpful in troubleshooting?

Yes ☐ No ☐

- Did the diagnostics accurately identify the problem?

Yes ☐ No ☐

If No:

- Please describe the issues you had with the diagnostics program.

7. Have you replaced any of the circuit cards in the Redcom switch?

Yes ☐ No ☐

If Yes:

- Did you encounter any difficulty in getting the proper replacement parts?

Yes ☐ No ☐

If Yes:

- Please describe the types of problems encountered and how they were resolved.

- Is the switch easy to maintain?

Yes ☐ No ☐

If No:

- Please describe the issues you have encountered with maintenance.

System Training and Documentation

8. Has your organization procured training services from Redcom?

Yes ☐ No ☐

If Yes:

– Please describe the types of training procured.

– Did you find the training provided helpful?

Yes ☐ No ☐

If No:

– How could it be improved?

9. Did you receive technical documentation with your Redcom switch?

Yes ☐ No ☐

If Yes:

– How would you rate the documentation received?

| | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Excellent | Good | Fair | Poor |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

Switch Versatility

10. Did the Redcom switch provide all the communication system interfaces needed for your solution?

Yes ☐ No ☐

If No:

- Please describe the systems that were being interfaced that were not supported.

11. Were radios interfaced to the Redcom switch in your solution?

Yes ☐ No ☐

If Yes:

- Please provide the following information:

| Type of Radio (LMR, Ground-to-Air, etc.) | Frequency Band | Manufacturer |
|---|-------------------|--------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

- Did you purchase interface cables?

Yes ☐ No ☐

If Yes:

- Please provide the following information:

| Part Number | Manufacturer | Model of Radio Supported | Manufacturer Contact Information |
|-------------|--------------|--------------------------|----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

- Please describe your experience with interfacing radios with the Redcom switch.

12. Have you had to use external devices with the Redcom switch to satisfy interfacing requirement?

Yes ☐ No ☐

If Yes:

- Please provide the following information:

| Type of Device | Manufacturer | Model |
|----------------|--------------|-------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Ease of Use

13. Has your organization used the programming software provided with the switch?

Yes ☐ No ☐

If Yes:

- Please rate the ease of use of the software?

- Please list any issues with the software that have been encountered.

14. Have you had to use any complex software and/or hardware settings to implement a configuration?

Yes ☐ No ☐

If Yes:

- Please explain the configuration, ease of process, and final result.

15. How would you rate the systems user interface on a scale from one to ten with ten being the best?

16. Did your organization use the conferencing features of the switch to bridge disparate systems together? (i.e., telephones to radios)

Yes ☐ No ☐

If Yes:

– Please describe the configurations.

– Did the conferencing feature work as expected?

Yes ☐ No ☐

If No,

– Please describe the problems encountered with the conferencing feature.

– Is the conferencing feature easy to use?

Yes ☐ No ☐

If No:

– Please describe the problems that were encountered.

System Applications or Configurations

17. Have you used the Redcom switch in any unique applications?

Yes ☐ No ☐

If Yes:

- Please explain the application and purpose.

18. Did you utilize all of the capabilities that the Redcom switch provided?

Yes ☐ No ☐

If Yes:

- Please explain how the capabilities were used.

If No:

- Please explain the capabilities that were not used.

19. Have you found any limitations with your implementation of the Redcom switch?

Yes ☐ No ☐

If Yes:

– Please provide the following information:

| Type of Limitation | Quantity | Observed Problem |
|--------------------|----------|------------------|
| Number of Users | | |
| Number of Agencies | | |
| Number of Systems | | |
| Other | | |

System Cost

20. What were the costs for implementation of the Redcom switch?

| Item | Purpose | Cost | No Cost | Don't Know |
|-------------------|---------|------|--------------------------|--------------------------|
| Redcom Switch | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Internal Software | | | <input type="checkbox"/> | <input type="checkbox"/> |
| External Software | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Programming | | | <input type="checkbox"/> | <input type="checkbox"/> |
| External Hardware | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Interface Cables | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Engineering | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Other | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Other | | | <input type="checkbox"/> | <input type="checkbox"/> |